Name of Person Signing

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| AMENDMENT / IDS / TERMINAL DISCLAIMER/ FEE TRANSMITTAL | | | | | | | |
| ADDRESS TO: | | Application No.: | | 10/791,632 | | | |
| | | Confirmation No.: | | 3084 | | | |
| Commissioner for Patents Alexandria, VA 22313-1450 | | Filing Date: | | March 1, 2004 | | | |
| | | First Named Inventor: | | AGARWAL ET AL. | | | |
| | | Examiner Name: | | LI, ZHUO H | | | |
| | | | | • | | | |
| | | Art Unit: | | 2185 | | | |
| | | Title: Reducing the Number of Block Masks Required for Programming Multiple Access Control Lists in an Associative Memory | | | | | |
| | | Attorney Docket No. | | 15654 | | | |
| EXTRA CLAIM FEES FOR UTILITY APPLICATION (NON-SMALL ENTITY) | | | | | | | |
| PENDING CLAIMS - HI NUMBER PREVIOUSL | | | EXTRA | RA | TE | | |
| Independent | 6 - | 6 | = 0 | x \$200 (fee | | \$0 | |
| Total Claims | 30 - th extension of time u | 30 | = 0 | | code 1202) | \$0 | |
| 1.17(p) Submission of an Information Disclosure Statement \$6 | | | | | | \$120 \$0 | |
| ☐ 1.20(d) Term | ninal Disclaimer | (27) - 11 - | | \$0 eved Due) TOTAL FEES = \$120 | | | |
| (2010101230) 10 11121 | | | | | | | |
| PLEASE CHARGE MY CREDIT CARD FOR THE FEES DUE (form PTO-2038 included herewith) | | | | | | | |
| The Commissioner is also authorized to credit overpayments or charge any fees due under 37 CFR 1.16 or 37 CFR 1.17 to Deposit Account No. 501430. The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 501430 for any fee that may be due in connection with such a request for an extension of time. 22. CORRESPONDENCE ADDRESS | | | | | | | |
| CUSTOMER NUMBER: 26327 | | | | | | | |
| Kirk D. Williams, Esq., The Law Office of Kirk D. Williams PO BOX 61538, DENVER, CO 80206-8538, Telephone: 303-282-0151, Facsimile: 303-778-0748 | | | | | | | |
| Name Kirk D. Williams | | | | | | | |
| Signature | 1 | 150 | | | | | |
| | March 2 2007 3-2-2007 | | | | | | |
| | | | | | | | |
| Certificate of Mailing or Pransmission Under 37 C.F.R. 1.8 I hereby certify that this Transmittal and all accompanying documents are being deposited with the United States Postal Service with sufficient postage as first class mail, on the date indicated below and addressed to: Commissioner For Patents, PO Box 1450, Alexandria VA 22313-1450, or being facsimile transmitted to the USPTO, 571-273-8300, on the date indicated below. | | | | | | | |
| Kirk D. Williams, Esq. March 2, 2007 | | | | | | | |

Signature

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MAR 0 2 2007 PATENT Attorney Docket No. 15654

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

AGARWAL ET AL.

Application No. 10/791,632

Confirmation No. 3084

Filing Date: March 1, 2004

For: Reducing the Number of Block Masks

Required for Programming Multiple Access Control Lists in an Associative

Memory

Group Art Unit: 2185

Examiner: LI, ZHUO H

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this paper is being deposited with the United States Postal Service on the date shown with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria VA 22313-1450, or being facsimale transmitted to the USPTO, 571-273-8300 on March 2, 2007.

Commissioner for Patents Alexandria, VA 22313-1450

Dear Sir:

The Office action dated November 2, 2006, and the references cited have been fully considered. In response, please enter the amendments presented herein and consider the following remarks. Reconsideration and/or further prosecution of the application is respectfully requested.

AMENDMENT A

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 11 of this paper.

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